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APPLICANTS

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** CONTINUING DATA *****

None

** FOREIGN APPLICATIONS *****

CHINA 03121280.8 04/01/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/24/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 10	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

027765

TITLE

METHOD OF FORMING AND TESTING A PHASE SHIFT MASK

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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